

CONREX

PROPERTY MANAGEMENT

COMPANY CONTACT

LEGAL COMPANY NAME (as indicated on W-9)		DBA NAME	
TELEPHONE		MAILING ADDRESS	
FAX			
EMAIL			
POINT OF CONTACT NAME & TITLE		WEBSITE	
CONTACT PHONE		CONTACT EMAIL	

COMPANY OVERVIEW

GENERAL DETAILS OF SERVICES / GOODS			
DATE COMPANY ESTABLISHED		LEGAL STRUCTURE	
GEOGRAPHIC SERVICE AREA		BUSINESS TYPE	
BONDED?		WORKERS COMP?	
GL INSURED?		EPA LICENSCE #?	
TRADE LICENSED Y/N		TRADE LICENSE NUMBER	
ADDITIONAL INFO			

DISCLOSURE

Are you or your business a Related Party trade partner/supplier?

**Related Party is defined as having an exisiting relationship or affiliation with a current or past Conrex employee or a current or past Conrex employee having a financial interest in your company.*

YES/NO		IF SO WHO?	
NATURE OF RELATIONSHIP/AFFILIATION			

CERTIFICATION

I hereby affirm that all information supplied is true and accurate to the best of my knowledge and belief, and I understand that this information will be considered material in the evaluation of quotations, bids, and proposals. Notice must be given of any change in status impacting the information provided within ten (10) days of said change.

PRINTED / TYPED NAME		TITLE	
SIGNATURE		DATE	